PERMITTEE NAME/ADDRESS (Include	N
Facility Name/Location [if different])	

## IATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Form Approved OMB No. 2040-0004 Approval expires 6-10-80

NAME		(2-16)			(17-19)								
ADDRESS													
	PEF	PERMIT NUMBER				DISCHARGE NUMBER							
			MONITO	RING	PERIO	)							
FACILITY	YEAR	MO	DAY		YEAR	MO	DAY						

PARAMETER		(3 Card Only) (46-53)	QUANTITY OR LO	ITITY OR LOADING (34-61)		QUALITY OR C (46-53)		NO. EX	FREQUENCY OF	SAMPLE TYPE	
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	ANALYSIS (64-68)	(69-70)
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OF				HAVE PERSONALLY EXA MITTED HEREIN: AND BA							TELEPHO
	INC THI AC	QUIRY OF THOSE E INFORMATION CURATE, AND C	E INDIVIDUALS IMMEDIAT I, I BELIEVE THE SU COMPLETE. I AM AWAI	TELY RESPONSIBLE FOR IBMITTED INFORMATION RE THAT THERE ARE S	OBTAINING IS TRUE, SIGNIFICANT					İ	
	OF	FINE AND IMPRI	ISONMENT. SEE 18 U.S	MATION, INCLUDING THE I C.C. § 1001 AND 33 U.S	.G. § 1319.	SIGNA	TURE OF PRIN	NCIPAL EX	ECUTIVE		
TYPED OR PRINTED		nalties under these s ween 6 months and 5		to \$10,000 and/or maximum in	nprisonment of		CER OR AUT	-		AREA CODE	NU

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Permitted dewatering was not conducted during this time period.

LOCATION